PTO/SB/17 (10-04)

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TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)	1850.00	
(4)	1000.00	

	omplete if Known
Application Number	10/064006
Filing Date	June 4, 2002
First Named Inventor	Gopichandra Surnilla
Examiner Name	Bibhu Mohanty
Art Unit	3747
Attorney Docket No.	81046568

METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)						
Check Credit card Money Other None			3. ADDITIONAL FEES						
Deposit .	Account:	01001			Entity				
Deposit		06 1510		Fee Code		Fee Code	Fee (\$)	Fee Description	Fee Paid
Account Number		06-1510		1051	130	2051	65	Surcharge - late filing fee or oath	
Deposit Account Name	Ford Glob	al Technologies, l	LLC	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
	s authorized to	o: (check all that apply)		1053	130	1053		Non-English specification	
	(s) indicated be		verpayments	1812	2,520	1812		For filing a request for ex parte reexamination	
Charge any	additional fee(s) or any underpayment o	f fee(s)	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
	ufficient funds in Account No. 06	ı this account, please chai 3-1505	rge the	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
	FEE C	ALCULATION		1251	110	2251	55	Extension for reply within first month	1
1. BASIC F				1252	430	2252	215	Extension for reply within second month	
Large Entity				1253	980	2253	490	Extension for reply within third month	
	Fee Fee Code (\$)	Fee Description	Fee Paid	1254	1,530	2254	765	Extension for reply within fourth month	
	2001 395	Utility filing fee		1255	2,080	2255	1,040	Extension for reply within fifth month	
1002 350	2002 175	Design filing fee		1401	340	2401	170	Notice of Appeal	
1003 550	2003 275	Plant filing fee		1402	340	2402	170	Filing a brief in support of an appeal	
1004 790	2004 395	Reissue filing fee		1403	300	2403	150	Request for oral hearing	
1005 160	2005 80	Provisional filing fee		1451	1,510	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 0.00			1452	110	2452	55	Petition to revive - unavoidable		
		1453	1,330	2453	665	Petition to revive - unintentional			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Fee from		1501	1,370	2501	685	Utility issue fee (or reissue)	1370.00		
Total Claims		Extra Claims below	Fee Paid	1502	490	2502	245	Design issue fee	
Lindonondont 20 2			0.00	1503	660	2503		Plant issue fee	
Claims Multiple Deper	<u> </u>	300	0.00	1460	130	1460	130	Petitions to the Commissioner	
· '		_ 300]	1807	50	1807	7 50	Processing fee under 37 CFR 1.17(q)	
Large Entity Fee Fee	Small Entity Fee Fee	Fee Description		1806	180	1806		Submission of Information Disclosure Stmt	180.00
Code (\$) 1202 18	Code (\$) 2202 9		1	8021	40	8021	1 40	Recording each patent assignment per property (times number of properties)	
1201 88	2201 44			1809	790	2809	395	Filing a submission after final rejection (37 CFR 1.129(a))	
1203 300	2203 150		•	1810	790	2810	395	For each additional invention to be examined (37 CFR 1.129(b))	
1204 88	2204 44	** Reissue independer over original patent	nt claims	1801	790	2801	395	Request for Continued Examination (RCE)	
1205 18	2205 9	** Reissue claims in ex		1802	900	1802	900	, , ,	
SUBTOTAL (2) (\$) 0.00			Other fee (specify) Publication Fee				300.00		
**or number		d, if greater; For Reissues		*Redu	iced by	Basic i	Filing F	ee Paid SUBTOTAL (3) (\$) 1850	0.00

SUBMITTED BY			(Complete ((if applicable))
Name (Print/Type)	John Russell	Registration No. (Attorney/Agent) 47,048	Telephone	(503) 224-6655
Signature			Date	October 26, 2004

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PTO/SB/21 (02-04)

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TRANSMITTAL FORM (to be used for all correspondence efter initial filling) Total Number of Pages in This Submission 16+ Total Number of Pages in This Submission 16- Total Number of Pages in This Submission	TRANSMITTAL		Application Number	10/064,006			1	
Art Unit 3747 Examiner Name Bibhu Mohanty Total Number of Pages in This Submission 16+ Attorney Docket Number 81046568 ENCLOSURES (Check all that apply) ENCLOSURES (Check all that apply) After Allowance communication to Total Number 1 Atterney Docket Number 1 Atterney Docket Number 2 Appeal Communication to Total Number 1 Atter Allowance Communication to Total Number 1 Atter Appeal Communication to Total Number 2 Appeal Communication to Total Number 3 After Final 1 Petition 1 Petition 2 Appeal Communication to Total Number 3 After Final 2 Petition 1 Power of Attorney, Revocation 2 Proprietary Information Power of Attorney, Revocation 2 Proprietary Information Power of Attorney, Revocation 2 Status Letter 2 Other Enclosure(s) (please Identify Delow): Extension of Time Request 1 Request Tor Refund 1 Proprietary Information Disclosure Statement 2 Proprietary Information Disclosure Statement 3 Proprietary Information Proprietary Information Proprietary Information Proprietary Information Proprietary Information Proprietary Information Disclosure Statement 1 Proprietary Information Disclosure Statement 1 Proprietary Information Proprietary Information Disclosure Statement 2 Proprietary Information Disclosure Statement 3 Proprietary Information Disclosure Statement 2 Proprietary Information Disclosure Statement 3 Proprietary Information Dis	TRANSMITTAL		Filing Date					
Examiner Name Examiner Name Bibhu Mohanty	FORM		First Named Inventor					
Total Number of Pages in This Submission Total Number of Pages in This Submission 16+ Attorney Docket Number 81046568	(to be used for all correspondence after initial filing)		Art Unit	3747				
Signature Date Da			Examiner Name	Bibhu Mohant	y			
Fee Transmittal Form Drawing(s)	Total Number of Pages in This Submission	16+	Attorney Docket Number	Attorney Docket Number 81046568				
Fee Transmittal Form Fee Attached Amendment/Reply After Final After Final After Final After Aftidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts Incomplete Application Response to Missing Parts Under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Or Individual name CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with the date shown below. Typed or printed name Lauren Barberena	<u> </u>	ENC	LOSURES (Check all tha	t apply)				
Firm or Individual name Kolisch Hartwell C. Signature Date Octobe 6 2004 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name Lauren Barberena	Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts		Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Addr Terminal Disclaimer Request for Refund CD, Number of CD(s)	ess to Ap	Technolo peal Cor Appeals peal Cor opeal Not oprietary atus Lett her Encle entify bel Transmitt Form	ogy Center (TC) mmunication to Board and Interferences mmunication to TC tice, Brief, Reply Brief) Information er osure(s) (please low):		
or Individual name Registration No. 47,048 Signature Date CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name Lauren Barberena	SIGNA	TURE C	OF APPLICANT, ATTORN	EY, OR AGEN	T			
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Lauren Barberena	sufficient postage as first class mail in an er	peing facsi evelope ad	imile transmitted to the USPTO or dressed to: Commissioner for Pa	deposited with the tents, P.O. Box 145	United \$	States Postal Service wit andria, VA 22313-1450 or	h n	
Signature Date October 26, 2004	Typed or printed name Lauren Barbe	erena						
	Signature	ul	Da		Date	October 26, 2004		

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